State of Rhode Island and Providence Plantations Department of Administration Division of Purchases

RIVIP BIDDER CERTIFICATION COVER FORM

SECTION 1 - BIDDER INFORMATION

Bidder must be registered as a vendor on the RIVIP system at www.purchasing.ri.gov to submit a bid proposal.

Solicitation Number:

7550621A1

Solicitation Title:

WASHBURN HALL PARKING LOT RECONSTRUCTION

Bld Proposal Submission

Deadline Date & Time:

6/20/2016

10:30AM

RIVIP Vendor ID #:

221

Bidder Name:

Cardi Corporation

Address:

400 Lincoln Ave.

Warwick, R1 02888

USA

Telephone:

(401) 739-8300

Fax:

(401) 732-0006

Contact Name:

Carl C. Engle

Contact Title:

Vice President/Chief Engineer

Contact Email:

sacardi@cardi.com

SECTION 2 - DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below

- 1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.
- 2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.
- 3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.
- 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasi-public

constitution of this state.	
Disclosure details (continue on additional sheet if necessary):	
SECTION 3 - OWNERSHIP DISCLOSURE	
Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed nonresponsive.	
If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other ow that hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is required.	ners
List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate partner.	
company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parents.	
company and the ultimate parent company of the bidder.	J.I.C
ANTONIO CARDI - PIR SOULA	
STROKEN L. CARRILLE - VICE POSSIBLE 400 LINCOLD AND	
Care (myle - View President Warnick, 21 02888	
Luga Colapatro - View President 401 - 739-8300	
SECTION 4 - CERTIFICATIONS	
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Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed	
nonresponsive.	
Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.	
THE BIDDER CERTIFIES THAT:	
1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occurrent the term of any contract awarded pursuant to this solicitation.	ur during
Y 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable	federal,
state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will ma required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required licentages or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.	intain ail nse shal l
3. The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.	required
4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Age	nt of any

corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or

3/18/2016

5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other

		remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.
7	6.	This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.
<u>T</u>	7.	The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.
<u>Y</u>	8.	The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.
Certifi	catio	on details (continue on additional sheet if necessary):
State and to with in the acknowledge contraction to the contraction of	e of the its e to oweraces	sion by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation bid proposal. The Bidder certifies that: (1) the Bidder has reviewed this solicitation and agrees to comply terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted bid proposal (including this Bidder Certification Cover Form) is accurate and complete. The Bidder ledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any tawarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below ints, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.
		BIDDER
Date): <u> </u>	Name of Bidder Signature intak A. Card: I. Vice Pres
		Printed name and title of person signing on behalf of Bidder

State of Rhode Island and Providence Plantations Department of Administration Division of Purchases

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7550621A2

Solicitation Title:

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221

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Telephone:

(401) 739-8300

Fax: Contact Name: (401) 732-0006

Carl C. Engle

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- 2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.
- 3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.
- 4. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is serving or has served within the past two calendar years as either an appointed or elected official of any state governmental authority or quasi-public

corporation, including without limitation, any entity created as a legislative body or public or state agency by the general assembly or constitution of this state.

Disclosure details (continue on additional sheet if necessary):			
SECTION 3 - OWNERSHIP DISCLOSURE			
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nonresponsive.			
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List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the bidder.			
Aurosio B. Caro - President			

SECTION 4 - CERTIFICATIONS

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.

CAZDI JE - Vices

- 1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to this solicitation.
 - 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.
 - 3. The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.
 - 4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.
 - 5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other

		remuneration has been or will be received from any third party or paid to any third party contingent on the award of a contract pursuant to this solicitation.
<u>\</u>	6.	This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.
	7.	The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.
<u>Y</u>	8.	The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.
Certifi	catio	on details (continue on additional sheet if necessary):
Cube	oio.	sion by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the
State and to with in the acknown cont	e of the its e to ow rac	Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation bid proposal. The Bidder certifies that: (1) the Bidder has reviewed this solicitation and agrees to comply terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted old proposal (including this Bidder Certification Cover Form) is accurate and complete. The Bidder ledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any t awarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below ints, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.
		BIDDER
Date	:_(0-70-7016 Ca281 Co200 25-1010 Name of Bidder
		Signature in ink Steples A. Corde II. Vice. Pres reur Printed name and title of person signing on behalf of Bidder

DOCUMENT 00410 - BID FORM

Date:	6-20-2016
То:	The State of Rhode Island Department of Administration Division of Purchases, 2 nd Floor One Capitol Hill, Providence, RI 02908-5855
Project:	Washburn Hall Parking Lot Improvement University of Rhode Island, Kingston Campus
Bidder:	Legal name of entity
	400 Lincoln Aug Warwick RI 07888 Address (street/city/state/zip)
	STEPHEN A. CARDI TI SACARDI Q. CARDI COM Contact name Contact email
	401- 439- 8300 401- 432-0006 Contact telephone Contact fax
	Bidder submits this bid proposal to perform all of the work (including labor and materials)

 We have included the specified Allowances from Section 01200 in Division 1 of the Specifications in the above Bid sum as follows:

Two Hundred Towlve Thousand Four Hundres (\$ 212,490.00.)
(written, and Ninery Dollars numerically)

Office of Capital Projects

Standard Contract Documents – State Bid Washburn Hall Parking Lot Improvements URI Project No. KC.T.RSDI.2016.002

Utility Allowance\$20,000Testing Allowance\$2,500Total Allowances\$22,500

- We have included the required Bid security in the above Bid Sum. We have included 100% Payment and Performance Bonds in the above Bid Sum.
- We have included the original Bid and required additional "public copy" if required by Document 00210 Supplemental Instructions to Bidders.
- We agree to comply with all requirements of RI General laws including those requiring prevailing wages and apprenticeship hours.
- We have completed the Bid Form provided below.
- We have provided a Price for the Alternate Bid.

				In De	ollars and Cents
Item No.	Item Description	Unit	Est. Quantity	Unit Price	Item Price
1	Washburn Hall Parking Lot Improvements, Complete in Place ONE HUNDRED Eighty Nove Thousand Nove Hundred Novey Dollars. (Lump Sum written in words)	LS	N/A	N/A	\$ <u>189,990.</u> 00
2	Allowance for Utilities Twenty Thousand Dollars 00/100 (Lump Sum written in words)	LS	N/A	N/A	\$20,000.00
3	Allowance for Testing Two Thousand Five Hundred Dollars 00/100 (Lump Sum written in words)	LS	N/A	N/A	\$2,500.00
-				BID	\$ 212,490.00

- 2. ALTERNATES None
- 3. UNIT PRICES None.

4. ACCEPTANCE

This offer shall be open to acceptance and is irrevocable for sixty days from the bid closing date. If this bid is accepted by the Owner within the time period stated above, we will:

- Proceed under the Agreement, subject to compliance with required State regulatory agency approvals as described in the Bid Documents.
- Furnish the required bonds in compliance with amended provisions of the Instructions to Bidders.
- Commence work within seven days after receipt of a Purchase Order from URI Purchasing. If this bid is accepted within the time stated, and we fail to commence the Work, or we fail to provide the required Bonds, the security deposit shall be forfeited to the Owner by reason of our failure, limited in amount to the lesser of the face value of the security deposit or the difference between this bid and the bid upon which a Contract is signed.

In the event our bid is not accepted within the time stated above, the required security deposit shall be returned to the undersigned, in accordance with the provisions of the Instructions to Bidders; unless a mutually satisfactory arrangement is made for its retention and validity for an extended period of time.

5. CONTRACT TIME

If this Bid is accepted, we will achieve Substantial Completion of the Work within 120 days. In addition, the following restrictions apply.

- 1. Construction work will not be permitted during the month of September 2016.
- 2. If work is started prior to the month of September, the roadway shall be made maintained and rideable during this period.
- 3. The 120 days includes the month of September 2016.

We have included all premium time or additional staffing required to accommodate this schedule.

6. LIQUIDATED DAMAGES

<u>Time is of the Essence</u>: If we fail to achieve certification of Substantial Completion at the expiration of the agreed upon Contract Time indicated above, we acknowledge that we will be assessed Liquidated Damages for each calendar day the project continues to be in default of Substantial Completion, as follows:

\$ 1,000 per calendar day.

7. REQUIREMENT FOR LICENSE NUM	BER
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In compliance with the requirements of Rhode Island General Law, Section 5-65-23, my Rhode Island license number for the work to be performed by this firm as prime contractor is:

LICENSE NUMBER: 31523

ADDENDA 8.

The following Addenda have been received.

Addendum No. 1, dated June 8, 2016

Addendum No. 2, dated June 9, 2016

The modifications to the Bid Documents noted below have been considered and all costs are included in the Bid Sum.

9. **BID FORM SIGNATURE(S)**

Vice President

Corporate Seal:

END OF DOCUMENT

FORM W-9 REV 8/15

STATE OF RHODE ISLAND FORM W-9 PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION



THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpaver Identification Number (T.I.N.) Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number. Social Security No. (SSN)	Employer ID No. (EIN) 0.5 0314973			
NAME CARDI CORPORATION				
ADDRESS 400 Linida Ave				
CITY, STATE AND ZIP CODE WARNICK 21 02888				
PAYMENT REMITTANCE ADDRESS, IF DIFFERENT FROM THE ADDRESS	ABOVE			
ADDRESS				
CITY, STATE AND ZIP CODE				
CERTIFICATION: Under penalties of perjury, I certify that: (1) The number shown on this form is my correct Taxpayer Identification Number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because either: (A) I am exempt from backup withholding, or (B) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (C) the IRS has notified me that I am no longer subject to backup withholding. (3) I am a U.S. citizen or other U.S. person (as defined by the IRS).				
<u>Certification Instructions</u> — You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because you have falled to report all interest and dividends on your tax return. For real estate transactions, item (2) does not apply.				
Please sign here and provide title, date and telephone number:				
SIGNATURE LEWEM. TITLE Vice Pro	DATE 6/20/16 TEL NO 401-139-8300			
BUSINESS DESIGNATION:				
Please Check One; Individual ☐ Corporation ☑ Trust/Esta				
Partnership				
TIPS: NAME: Be sure to enter your full and correct legal name as shown on your income tax return for the SSN or EiN provided. ADDRESS, CITY, STATE AND ZIP CODE: If you operate a business at more than one location, adhere to the following: Same EIN with more than one location — attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed. Different EIN for each different location — submit a completed W-9 form for each EIN and location. (One year-end tax information return will be reported for each EIN and remittance address.)				
Mail Completed Form To: Supplier Coordinator	For State Use Only:			
Purchasing Department One Capitol Hill, 2nd Floor	IRSRI SOSFEDOther			
Providence RI 02908	RI Supplier #Approved			
Or Email To: doa.pursuppliercoordinator@purchasing.rl.gov	Date Entered Entered By			

State of Rhode Island: Contractors' Registration and Licensing Board

REGISTRATION STATUS LOOKUP

Status Report Residential/Contractor (Pursuant to RIGL 5-65)

Key to Initials

Contractor Information

Registration Number: 31523 CARDI CORPORATION Stephen A Cardi 400 Lincoln Ave Warwick , RI 02888 (401)739-8300 Registration Type: Residential and Commercial Contractor

Registration Status

Registration Current?: YES

Registration Issue Date: 5/14/2008

Number of Claims: 0

Registration Surrender Date:

STATUS: VALID

Registration Expiration Date: 5/1/2018

Number of Violations: 0

Company has Employees?: YES

Insurance Coverage

STATE LAW REQUIRES CONTRACTORS WITH ONE OR MORE EMPLOYEES TO HAVE A WORKERS' COMPENSATION INSURANCE POLICY, ADDITIONALLY, ALL REGISTERED CONTRACTORS THROUGHOUT THE PERIOD OF REGISTRATION SHALL HAVE IN EFFECT PUBLIC LIABILITY AND PROPERTY DAMAGE INSURANCE COVERING THE WORK OF THAT CONTRACTOR NOT LESS THAN FIVE HUNDRED THOUSAND DOLLARS (\$500,000) COMBINED SINGLE LIMIT, BODILY INJURY AND PROPERTY DAMAGE.

Liability Insurance Carrier: LM INSURANCE

Expire Date: 8/1/2016

Insurance Agency Name: JOHN M. GLOVER AGENCY

Policy Number: TB5Z51291168025

Agency Tel.: 203-838-5554

Please contact the insurance agency to verify the status, accuracy, expiration date, and policy coverage.

The Rhode Island Contractors Registration And Licensing Board (hereinafter Content Provider) does not make any warranties concerning the Information content, express implied, or otherwise; All Information content is provided by content provider specifically disclaims the implied warranties of merchantability, fitness for a particular purpose and non-infringement with respect to the information content provided. Any discrepancies or updates to the information provided should be reported to the Content Provider at (401) 222-1268. This data is for informational purposes only and commercial use of this data is prohibited.